

Montana Laboratory Sentinel



Updates from the MT Laboratory Services Bureau
800-821-7284 www.lab.hhs.mt.gov

03/16/2012



National Estimate Shows Not Enough Young Women Tested for Chlamydia

Gaps in Testing Threaten Reproductive Health

Just 38 percent of sexually active young women were screened for chlamydia in the previous year, according to the most recent nationally representative estimate of chlamydia screening among this population conducted by the Centers for Disease Control and Prevention. CDC recommends annual screening for all sexually active women aged 25 and under.

Chlamydia is the most commonly reported infectious disease in the United States, and young people are most affected. Because people often do not have symptoms, many infections go undetected and untreated. Untreated chlamydia can have severe long-term health consequences, particularly for young women, including chronic pelvic pain, potentially fatal ectopic pregnancy and infertility.

STD screening and treatment is one of the most effective tools available to protect one's health and prevent the spread of STDs to others. Though far too few Americans are being screened and retested for chlamydia as CDC recommends, these data show that simple changes can help improve our ability to diagnose and treat STDs. Read more [here](#).

CDC is in the process of publishing revised guidelines for diagnostic testing of *C. trachomatis* and *N. gonorrhoeae*. Based on an expert consultation, two pertinent recommendations of interest are:

- Nucleic acid amplification tests (NAATs) are recommended for detection of reproductive tract infections caused by *C. trachomatis* and *N. gonorrhoeae* infections in men and women with and without symptoms.
- Optimal specimen types for NAATs are first catch urine from men and vaginal swabs from women.

2011 and 2012 Antibiograms!!

The Public Health Laboratory is requesting your participation in the development of the 2011 Montana statewide antibiogram. The validity and usefulness of this antimicrobial management tool are dependent upon the inclusion of data from all Montana laboratories performing susceptibility testing.

If you have not already done so, please consider sharing your antimicrobial susceptibility testing data, in aggregate form, with your clinical and public health partners. Data are appreciated in any format and public health laboratory staff are available to assist in the collection and compilation of data. Antibiograms may be submitted by FAX, email, or hard copy to [Jan Stetzer](#), 1400 Broadway, RM B105, Helena, MT 59601, FAX: (406) 444-1802.

The antibiogram tool for collection of 2012 data is available [here](#). Please take a moment to review the new [collection guidelines](#).

Training & Competence Assessment Workshop Applauded by Participants

Thirty one laboratory professionals, representing public health, clinical, environmental, and veterinary laboratories, from three states, participated in the Training and Competence Assessment workshop offered by the Montana Public Health Laboratory on February 29 in Billings. Nationally-recognized speaker and quality expert, Lucia Berte expanded upon "Laboratory Quality Management: How CLSI Guidelines Provide Value", which she presented in Helena in June 2011.

"Using CLSI Guidelines for Training and Competence Assessment", presented a model for laboratories, based on CLSI guidelines, which will assist participants in leveraging available time and resources to meet the diverse needs of customers, management, and accreditors. Participants received a training and assessment toolkit and the CLSI guidelines for Training and Competence Assessment and Proficiency Testing. The workshop was PACE approved for seven CEUs.



**Celebrate National Medical
Laboratory Professionals Week**
April 22-28, 2012

Montana Communicable Disease Weekly Update

Release date: 3/9/12



DISEASE INFORMATION

Summary – MMWR Week 9 - Ending 3/3/2012 – Preliminary disease reports received at DPHHS during the reporting period February 28 – March 3, 2012 included the following:

- Vaccine Preventable Diseases: Pertussis (4), Hepatitis B, Chronic (1), Varicella (2)
- Invasive Diseases: Invasive Group A *Streptococcus* (1), Invasive *Strep pneumoniae* (3), Viral Meningitis (1)
- Enteric Diseases: Campylobacteriosis (1), Cryptosporidiosis (2), Giardiasis (1), Salmonellosis (1)
- HIV Disease*: (2)
- Other Diseases: (0)
- Animal Rabies: (0)
- Travel Related Conditions: (0)

* A preliminary case is included if a new confirmatory test or report was received by DPHHS and it has not been previously identified as a case in Montana or any other state per initial investigation efforts.

NOTE: The attached report has multiple pages reflecting the following information: (1) vaccine preventable and enteric diseases YTD; (2) other communicable diseases YTD; (3) cases just this past reporting week; (4) clusters and outbreaks; and (5) a quarterly HIV/STD summary.

HOT TOPICS

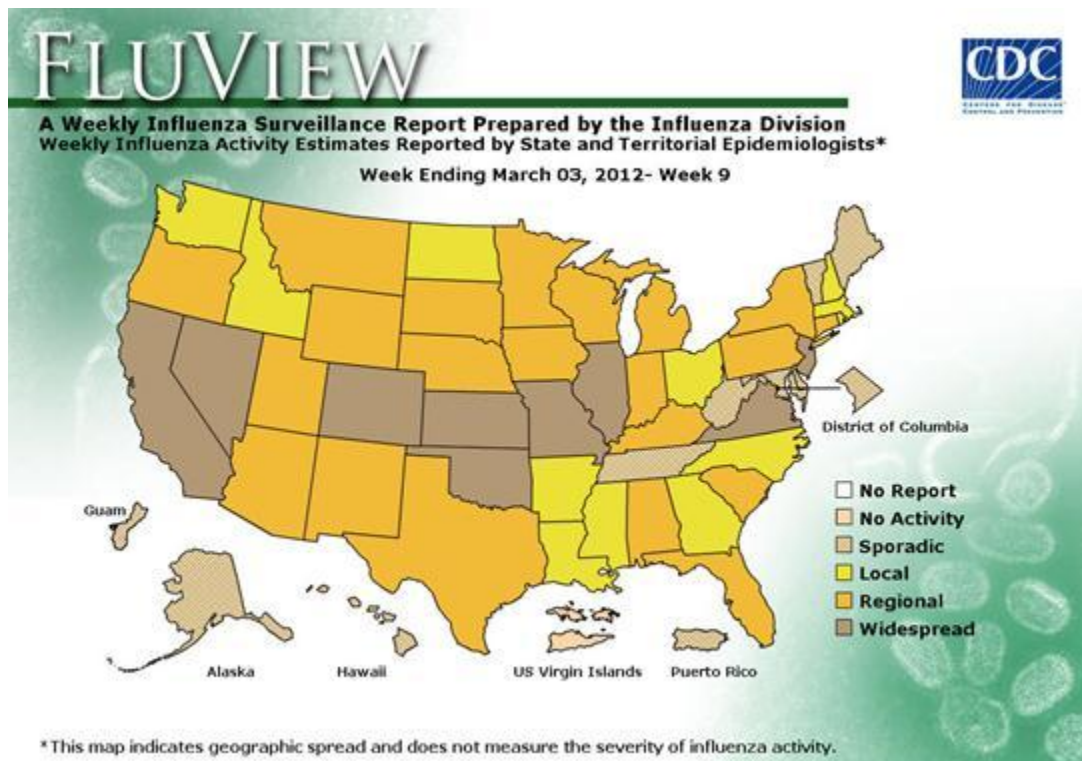
Meningococcal Disease: A college student in Butte has been diagnosed with meningococcal disease. Butte-Silver Bow (BSB) Health Department launched a thorough investigation to identify close contacts to the suspected case that may require chemoprophylaxis. Twelve close contacts received antibiotic treatment and many others not identified as close contacts have been vaccinated with meningococcal vaccine. BSB also worked with the college administration to provide meningococcal disease information to all students and faculty prior to the school's dismissal for Spring Break.

With the beginning of Spring Break, it is possible that students returning to their home counties and states and may seek vaccination and/or chemoprophylaxis from their healthcare providers or local public health. It's important to note that all identified close contacts have been identified and treated and we are not aware of any additional close contacts requiring treatment. Providers seeing students that are requesting chemoprophylaxis should contact the Butte-Silver Bow Health Department at 406-497-5020 before administering any antibiotics.

Hantavirus: As people begin to do spring cleaning, it is important to remember cleaning safety precautions for the prevention of hantavirus disease. Information on the prevention of hantavirus disease and the case report form is attached. For more information on hantavirus disease and its prevention, see: <http://www.cdc.gov/hantavirus/index.html>.

Pertussis: As of 3/9/2012, there are 13 reported cases of pertussis (10 laboratory confirmed and 3 epi-linked) in an outbreak reported by Dawson county. The most recent case was reported 3/9/2012. Most cases are occurring in older elementary-age children. The cases primarily resided in Dawson County, but contact investigations have involved multiple jurisdictions, Dawson and Roosevelt counties. Case finding and contact investigations are ongoing.

Influenza: The CDC weekly flu report is available and downloadable at CDC [FluView](http://www.cdc.gov/fluview).



The Montana Laboratory Services webpage has laboratory testing data on it that may be of interest.
<http://www.dphhs.mt.gov/publichealth/lab/news.shtml>

There are 49 MTPHL confirmed cases as of 3/2/2012. The influenza strains that are circulating throughout Montana are primarily influenza A H3 (31 cases), influenza A H1 (15), and influenza B (3). All three are well represented in the current seasonal vaccine.

Please continue to update and/or fill out your **Weekly County Flu Reports** (form attached). This is important particularly in relation to the uptick we are seeing.

INFORMATION / ANNOUNCEMENTS

Pertussis iLinc: CDEpi and Gallatin County will be giving an iLinc presentation on March 20th and 22nd. The presentation will discuss lessons learned during the pertussis outbreak in Gallatin County in late 2011.

Registration information:

March 20th at 9:00 AM

<https://nwcp.php.ilinc.com/register/yzymrhb>

March 22nd at 2:00 PM

<https://nwcp.php.ilinc.com/register/xcbkrp>

NEW CDC Vaccine Preventable Disease Surveillance Investigation Report: This self-study program provides information on case investigation, outbreak control, disease reporting, and case notification for vaccine-preventable diseases. The course discusses the epidemiologically important data that should be collected during case investigations and presents methods for enhancing surveillance. The course provides current surveillance guidance for HPV, measles, rotavirus, mumps, varicella, hepatitis B, pneumococcal disease, *Haemophilus influenzae*, pertussis, and meningococcal disease. The course is now available in web-on-demand format (<http://www.cdc.gov/vaccines/ed/surv/>) .

Clostridium difficile: The Centers for Disease Control and Prevention estimate approximately 14,000 people a year die from this preventable infection. Although other healthcare-associated infections have declined in recent years, infections with *C. difficile*, an organism that causes severe diarrhea, have climbed to historic highs and remain at high levels. People most at risk for these infections are those that have taken antibiotics and have also received medical care in any setting. Almost half of these infections occur in people younger than 65; however, more than 90% of deaths occur in people 65 and older. There are six things that clinicians can do to prevent these infections: http://www.cdc.gov/HAI/organisms/cdiff/Cdiff_clinicians.html#steps. For more information, see http://www.cdc.gov/HAI/organisms/cdiff/Cdiff_infect.html or the MT Healthcare-Associated Infection Prevention Initiative web site at <http://haiprevention.hhs.mt.gov>.

24/7 AVAILABILITY

The Communicable Disease Epidemiology program is available 24 hours a day/7days a week/365 days a year but is primarily directed toward you as local health jurisdictions with us as a last resort. If you need us to assist, please call 406.444.0273 if you need immediate communicable disease epidemiology assistance, the answering service will take a message and we will return the call as quickly as possible. Please ensure that your required 24/7 information is up to date and reported to us or PHEP if changes occur AND please ensure that you communicate YOUR local 24/7/365 number to your local providers.

This update is produced by the Montana Communicable Disease Epidemiology Program. Questions regarding its content should be directed to 406.444.0273 (24/7/365). For more information: <http://cdepi.hhs.mt.gov>